

CLAIMS ONLY							Application Number 10/827160	Filing Date
							Applicant(s)	
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51	
2							52	
3							53	
4							54	
5							55	
6							56	
7							57	
8							58	
9							59	
10							60	
11	1						61	
12	1						62	
13	1						63	
14	1						64	
15	1						65	
16	1						66	
17	1						67	
18	1						68	
19	1						69	
20	1						70	
21	1						71	
22	1						72	
23	1						73	
24	1						74	
25	1						75	
26							76	
27							77	
28							78	
29							79	
30							80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep	2	1						
Total Depend	1	1						
Total Claims	3	2						